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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD 10813200 Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) RATE (\$) FEE (\$) RATE (\$) FEE (\$) NUMBER EXTRA NUMBER FILED FOR N/A N/A BASIC FEE NΆ N/A (37 CFR 1.16(a), (b), or (c)) N/A N/A N/A SEARCH FEE NA (37 CFR 1.16(k), (i), or (m)) N/A EXAMINATION FEE N/A N/A N/A (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS × minus 3 (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). N/A MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) NA TOTAL If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS RATE (\$) ADDI-8 PRESENT RATE (\$) ADDI-NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY AFTER FEE (\$) 06 FEE (\$) PAID FOR ENT AMENDMENT Minus x 50 Total OR (37 CFR 1.16(i)) ENDMI Minus x 200 = 3 = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) OR N/A N/A TOTAL TOTAL ADD'L FEE ADD'L FEE (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS **PRESENT** ADDI-RATE (\$) ADDI-RATE (\$) NUMBER REMAINING TIONAL **EXTRA** TIONAL m PREVIOUSLY **AFTER** FEE (\$) FEE (\$) ENT PAID FOR AMENDMENT Minus Total (37 CFR 1,1661) = OR ENDM Independent (37 CFR 1.16(h)) Minus = X OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16[]) N/A OR NΑ TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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